OFFICE/RETAIL INCOME AND EXPENSE SURVEY FOR THE 2014 CALENDAR YEAR City of Falls Church

					Return to: City of Falls Church Real Estate Assessor's Office, 104- 300 Park Avenue Falls Church, Virginia 22046-3301 Voice: (703) 248-5107 Fax: (703) 248-5184 Email Address: real-estate@fallschurchva.gov On the internet: www.fallschurchva.gov						
4 d	etailed sentence	and Expense in et of instruction the form. If you	s is part of the should have a	is survey. The any questions	ese instructior or need assis	s are provide	d to assist you	in			
A		Loan Amount	Loa Date	n Term	Intere		Payment (P & I)	Payment Frequency (Mo. or Yr.)			
	1. 2. Has the	re been a profes	sional appraisa	al on this real pr	operty in the la	ast five years?	[] Yes [] N	No			
	Certif	Certification OFFICIAL REQUEST: TITLE 58.1-3294 CODE OF VIRGINIA State law requires certification by the owner or officially authorized representative. Please print or type all information except signature.									
В	2. 3. 4.	Address Contact Person	nagement company son Phone ss								
		All information including the accompanying schedules and statements have been examined by me and to the best of my knowledge and belief are true, correct, and complete. 5. Signature (required) Date									
	6. 7.	Print name									
			For Office Us	e Only Do	Not Write B	elow this Lir	ne				
		Survey Entered	Survey Verified	Survey Stabilized	Rents Entered	NBHD #	Received Date Entered	Owner Occupied			
	DATE NITIAL						Check above box if yes	Check above box if yes			

	Vacancy Information										
	1. Space vacant January 1 (2014)	Sg. Ft. Rentable									
	2. Space vacant January 1 (2013)										
C	Income loss from vacancy (reporting period)	-									
	4. Income loss from bad debts (reporting period)										
	5. Current market rent per sq. ft. for vacant space										
	Annual Income										
	Income for Period	2014									
	mo day yr mo day	<u>2014</u> yr									
	Primary Rental Income										
	Sales of Utilities										
	Rent Overage / % Rent										
	Common Area Maintenance Reimbursement										
	Interest Income										
D	Insurance Reimbursement										
	Operating Expense Reimbursement										
	Real Estate Tax Reimbursement										
	Parking Income										
	Antenna / Telecommunication Income										
	Other Rental Income (specify)										
	Miscellaneous Income (specify)										
	Total Actual Income										
	Capital Improvements, Renovations, Leasing Commissions, Tenant Impro	ovements									
	Have there been Capital Improvements or Capital Renovations to the property during this <u>reporting perio</u>	d·									
	Yes No If yes, please provide total cost here and attach a detailed list on separate page										
	res ivo Il yes, piease provide total cost nere and attach a detalled list on separate page.										
	Total Capital Cost										
	Does the property currently have any deferred maintenance? If yes, please provide the total cost to cure	and provide an									
	itemized list of the individual items along with cost estimates.										
Ε											
	Total Deferred Maintenance										
	What were the total <u>Leasing Commissions</u> paid during this reporting period?										
	What were the total Tenant Improvement Costs paid during this reporting period?										
	New Construction – Submit most recent AIA documents G702 and G703 with all associated soft costs.										

	Annu	Utilities Water and Sewer Electricity Other Utilities Maintenance and Repair Maintenance Payroll/Supplies HVAC Repairs Electric/Plumbing Repairs Elevator Repairs Roof Repairs Common Area / Exterior Repairs Decorating (carpet, paint, etc.)			
	1.	<u>Utilities</u>			
		Water and Sewer			
		Electricity			
		Other Utilities			
	2.	Maintenance and Repair			
		Maintenance Payroll/Supplies			
		HVAC Repairs	- <u></u> -		
		Electric/Plumbing Repairs	- <u></u> -		
		Elevator Repairs			
		Roof Repairs	<u> </u>		
		Common Area / Exterior Repairs			
		Decorating (carpet, paint, etc.)			
		Other Repairs / Maintenance (specify)			
	3.	Management and Administrative			
F	J.	Management Fees			
		Other Administrative/Payroll			
		Cutof / Carminottativo/1 dyron			
	4.	Services			
		Janitorial/Cleaning			
		Landscape (grounds maintenance)			
		Trash			
		Security			
		Window Cleaning			
		Snow Removal			
		Other Services (specify)			
	5.	Insurance and Taxes			
		Insurance (one year)			
		Other Taxes, Fees, HOA: (Do not include Real Estate Taxes)			
		Total Operating Expenses			
	NICT				
G		OPERATING INCOME			
	Total A	ctual Income less Total Expenses before Real Estate Taxes			
Н	REA	_ ESTATE TAXES			

OFFICE/RETAIL PROPERTY

TENANT/SPACE INVENTORY AS OF JANUARY 1, 2015

			REN	Т	_	ADDITIONAL AMOUNTS						ADJUSTMENTS		
1. Tenant Name and	2. Amount of Floor Space Leased	3. Lease Dates Mo/Day/Yr to Mo/Day/Yr	4. 5.		6. Rent	7. EXPENSE REIMBURSEMENTS AND PASS THROUGHS			12.	13.	14.			
Address/Suite Number. Include Vacant Spaces (If Lease <u>Is Not</u> Full Service Place Asterisk Adjacent To It)			Original Annual Base Rent Amount	Current Annual Rent Amount	Escalations % Fixed or CPI Factor	Overage or % Rent (If Any)	8. Expense Stop (\$)	9. Amount Paid in Excess of Expense Stop	10. Common Area Maintenance	11. R. E. Taxes (If Separate)	Mo. Free Rent	Total Leasing Commission	Landlord Paid Build Out Costs	